Approved, SCAO OSM CODE: OAG

STATE OF MICHIGAN PROBATE COURT COUNTY

ORDER APPOINTING TEMPORARY GUARDIAN OF INCAPACITATED INDIVIDUAL

FILE NO.

CIRCUIT COURT - FAMILY DIVISION		INOAI AOITATED INDIVIDUAE				
In the matter of _					, an in	capacitated individual
Court ORI	Date of birth	Race	Sex	Current address o	f incapacitated individ	lual
1. Date of hearing	j:	Judge:	·			
THE COURT FIN	DS:					Bar no.
3. The individu		☐ chronic u ☐ chronic i	use of ntoxica	drugs ation	appears to have	
incapacitated in 4. The appoint individual re 5. There is no	ndividual. ed guardian is not ef quires immediate ac qualified, suitable ind	ufficient understanding or ca fectively performing his/her of tion. lividual willing to act as tempo pest interest of the adult. A p	guardia orary g	anship duties, ar guardian and the	nd the welfare of t	he incapacitated
IT IS ORDERED:						
6. Name (type or prin	nt)			, who	se address and te	elephone number are:
Personal bo	nd at \$	City the adult and shall qualify bymust be filed. the following powers and res	_		•	Telephone no.
8. This temporary	guardianship shall t	erminate	days aft	er date of order)	_ ·	
The Michigan I this court order	Department of State	Police shall immediately entenent information network.	er the i	incapacitated inc	lividual's identifyi	ng information in
Date		Jυ	ıdge			
Attorney name (type o	r print)	Bar no.				
Address		City		State	Zip	Telephone no.

Do not write below this line - For court use only